Town of Milton 115 Federal Street Milton, DE 19968

Address:



www.milton.delaware.gov Phone: 302-684-4110

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## PARK REQUEST FORM

Individuals and organizations are welcome to request use of Town parks for special events. Requests are reviewed on a first-come, first-served basis at the discretion of the Town. Park Requested: ☐ Milton Memorial Park ☐ Gazebo ☐ Mill Park ☐ Other: \_\_\_\_\_ Date(s) Requested: Start Time: End Time: Rain Date(s) Requested:\_\_\_\_\_\_Start Time:\_\_\_\_\_ End Time:\_\_\_\_\_ Description of Event: \_\_\_\_\_ Is the event open to the public?  $\square$  Yes  $\square$  No Estimated Number of Attendees: \_\_\_\_\_ I agree to pay a \$ security deposit based on an estimate of attendees. Also, a usage fee of:  $\Box$  \$150.00 (100 or more)  $\Box$  \$75.00 (50 or more)  $\Box$  \$25.00(Less than 50) Will you require (check all that apply): □ Vendor Permit □ Restrooms (in excess of 100 attendees, an additional portable toilet must be provided by the Requestor) □ Parade Route □ Electricity □ Water □ Other (specify): • Vendor Permit (Peddler's License) is required in accordance with Chapter 93 of the Town Code and can be obtained at Town Hall. If you require a Parade Route, contact Delaware Department of Transportation for approval prior to submitting the Parade/Public Assembly Request Form. A map of the parade route must be attached to the request form. Please note that a separate Parade Permit is required, in addition to the Park Request Form. Do you seek permission to fundraise or collect monies as part of the event  $\square$  Yes  $\square$  No (If Yes, include purpose for request to collect monies): May we include contact information for this event on our website?  $\square$  Yes  $\square$  No Insurance Carrier: \_\_\_\_\_ Insurance Policy Number:\_\_\_\_ Organization Name: Contact Name(s):

Telephone 1:	Telephone 2/Cell:	Fax:	
	Preferred Contact:   Telephone   E-Mail		
I,	, certify that the above inform	mation is correct, and that I have re	ceived,
read and agree to the Town of Milton Park Use Policies and that I am the authorized representative of			
the above-named organization, serving in the position of			
_			
Liability and Responsibility of Applicant			
By signing this Park or	Gazebo Use Request Form, I,	, accept the privi	lege of
the use of the Town of Milton property on behalf of the above-named organization. I understand that			
permission to use the Town park and/or gazebo may be revoked at any time for violation of the Town			
of Milton Park Use Policies. I further acknowledge that the above-named organization shall be			
•		maintenance repair fees, etc., if so re	-
3	•	Town harmless for any damages, in	5 5
accident related to the u	ise of the park during the event. O	ur organization accepts the premises	s in the
condition that we found	them in and we will leave the area	a in the same condition. We make no	o claim
against the Town for def	fective condition of the premises or	for any other matter.	
Signed:		Date:	